



**Government of the
District of Columbia**

Office of Tax
and Revenue

Recorder of Deeds
515 D Street, NW
Washington, DC 20001
Phone (202)727-5374

Real Property Recordation and Transfer Tax Form FP 7/C

PART A - Type of Instrument

☐ Deed ☐ Tax Deed ☐ Deed of Trust ☐ Trustee Deed
☐ Easement ☐ Modification ☐ Lease ☐ Other

PART B - Property Description/Data/Property Being Conveyed

Square Suffix Lot Square Suffix Lot

If more than one lot, list Square/Suffix/Lots below or attach addendum:

Square and/or Parcel **Lot(s)**

Property Address **Unit No.**
Street Number Street Name Quadrant

Property Use ☐ Residential ☐ Commercial ☐ Condominium ☐ Apartment

In addition to the use above, is this property being rented? ☐ Yes ☐ No

Interest Transferred ☐ Fee ☐ Leasehold ☐ Leasehold Improvement
☐ Easement ☐ Other

Interest Conveyed % Does this transfer include Condo Parking? ☐ Yes ☐ No

If YES, what is the parking account?
Square Suffix Lot

Sale Type ☐ Single/Parcel Improved - Arms Length
☐ Single/Parcel Vacant - Arms Length
☐ Multiple Parcels ☐ Arms Length, ☐ Not Arms Length

Date of Deed **Consideration \$** (Part J, Line #1)

Was personal property included in this transfer? ☐ Yes ☐ No

If YES, what type? Estimated Value \$

PART C - Instrument Submitted by or Contact Person

Name Firm
Address
City State Zip

PART D - Return Instrument To

Name Firm
Address Phone
City State Zip

PART E - Exemption Application

Recordation Tax ☐ Yes ☐ No

Reason for Recordation

Tax Exemption #

Transfer Tax ☐ Yes ☐ No

Reason for Transfer

Tax Exemption #



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Square

Suffix

Lot

PART F - Grantee Notification

1. **Homestead/Senior Deduction:** Is the property being transferred described in Part B, going to be used as an owner occupied residential property by the new owner?

Yes

No

If this is a refinance is the owner presently enrolled in the Homestead exemption Program?

Yes

No

2. **Mixed Use Tax Class:** Will this property be mixed use property?

Yes

No

3. **Low Income Tax Abatement:** Low income home owners may qualify for a 5-year tax abatement. If you are a low income homeowner you must complete and attach a Low Income Tax Abatement Application. If qualified, the tax abatement will begin for the first tax year following the transfer.

PART G - Grantor(s) Information

Grantor

Grantor

Grantor

Grantor

Address

Phone

City

State

Zip

Grantor Tenancy

Tenants in Common

Joint Tenants

Trustee

Tenants by Entireties

Sole

Grantor Social Security # or Fed. ID #

PART H - Grantee(s) Information

Grantee

Grantee

Grantee

Grantee

Address

Phone

City

State

Zip

Grantee Tenancy

☐ Tenants in Common

☐ Joint Tenants

☐ Trustee

☐ Tenants by Entireties

☐ Sole

Interest Acquired % Grantee Social Security # or Fed. ID #

PART I - Mailing Address for Grantee (If different from Part H)

Last Name

First Name

Middle Name

Unit #

Address

City

State

Zip

Phone

PART J - Consideration and Financing (complete all items; insert zero if no amount)

Cash

\$

First Mortgage

\$

Second

\$

Assumed

\$

Other \$

1. Construction Loan \$

2. Total Consideration

\$

3. If no consideration, use Assessed Value (see Assessment Roll)

\$



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PART K - Computation of Tax

1. Recordation of Tax	1.1% of Line 2 or Line 3, Part J	\$	<input type="text"/>
1. Transfer Tax	1.1% of Line 2 or Line 3, Part J	\$	<input type="text"/>
1. Recordation Tax	1.1% of Line 1 (Construction Loan)	\$	<input type="text"/>
2. Recordation of Tax	1.5% of Line 2 or Line 3, Part J	\$	<input type="text"/>
2. Transfer Tax	1.5% of Line 2 or Line 3, Part J	\$	<input type="text"/>
2. Recordation Tax	1.5% of Line 1 (Commercial Construction Loan)	\$	<input type="text"/>
3. Total of Lines 1 or 2	\$	<input type="text"/>

PART L - Affidavit (Part A to L)

I/We hereby swear or affirm under penalty of perjury that this return, including any accompanying schedules/documents/and statements, has been examined by me/us and to the best of my/our knowledge and belief, the statements and representations are correct and true. I/We hereby acknowledge that any false statement or misrepresentations I/We made on this return is punishable by criminal penalties under the laws of the District of Columbia.

Grantor(s)

Typed Name

Signature

Date

Subscribed to and sworn to before me
by Grantor(s) this day of
 , 200 .

Notary Public

My Commission Expires:
mm/dd/yyyy

Grantee(s)

Typed Name

Signature

Date

Subscribed to and sworn to before me
by Grantee(s) this day of
 , 200 .

Notary Public

My Commission Expires:
mm/dd/yyyy

**This information is subject to audit within three years of filing.
Please keep all supporting documentation.**